1214366

区 Rule 506

Telephone Number

Telephone Number

(650) 314-0505

Same as above

Year Year

X

☐ other (please specify):

区 Actual

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



Filing Under (Check box(es) that apply):

Enter the information requested about the issuer

2465 Latham Street, Suite 100, Mountain view CA 94040

Actual or Estimated Date of Incorporation or Organization:

Computer Software and Hardware Development

Jurisdiction of Incorporation or Organization:

Type of Filing:

Acelere, Inc.

Same as above

corporation

☐ business trust

Address of Executive Offices

(if different from Executive Offices)

Brief Description of Business

Type of Business Organization

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

☐ Rule 505

New Filing

A. BASIC IDENTIFICATION DATA

(Number and Street, City, State, Zip Code)

OMB	A	DDD	ΛV	ΑT

OMB Number: 3235-0076 Expires: May 31, 2005 Estimated average burden hours per form......1

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(lnc	luding Area C	Code)	
(Inc	luding Area C	Code)	

THOMSON

☐ Estimated

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Month

(Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Name of Offering (\square check if this is an amendment and name has changed, and indicate change.) Issuance of Series A Preferred Stock and Common Stock issuable upon conversion thereof

Name of Issuer (check if this is an amendment and name has changed, and indicate change.)

Address of Principal Business Operations (Number and Street, City, State, Zip Code)

☐ Rule 504

☐ limited partnership, already formed

☐ limited partnership, to be formed

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.



A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and

• Lacii ge	neral and managing partner of	partiteiship issueis.			
Check Box(es) that Apply:	Promoter	☑ Beneficial Owner	Executive Officer	☒ Director	General and/or Managing Partner
Full Name (Last Kathail, Vinod	name first, if individual)				
	·	Street, City, State, Zip Code) 00, Mountain view CA 94040			
Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last Gleason, Craig	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code) 00, Mountain view CA 94040			
Check Boxes that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last Aditya Gupta,	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code) 00, Mountain view CA 94040			
Check Boxes that Apply:	Promoter	☑ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last Foundation Ca	name first, if individual)				
		Street, City, State, Zip Code)	· · · · · · · · · · · · · · · · · · ·		
	l, Suite 200, Menlo Park, CA				
Check Boxes that Apply:	☐ Promoter	Beneficial Owner	☐ Executive Officer	☑ Director	General and/or Managing Partner
Full Name (Last Grosser, Adam	name first, if individual)				
	idence Address (Number and , Suite 200, Menlo Park, CA	Street, City, State, Zip Code) 94025			
Check Boxes that Apply:	Promoter	☐Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last Bouchard, Phil	name first, if individual)				,
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			
	<u> </u>	00, Mountain view CA 94040	·	·······	
Check Boxes that Apply:	☐ Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			

					В.	INFORMA	TION ABO	OUT OFFE	RING				
1.	Has the issu	er sold, or do	es the issue	r intend to s					under ULOE.			Yes N	D _X
2.	What is the	minimum in	vestment tha	it will be ac	cepted fron	n any individ	ual?					\$ <u>N/A</u>	
3.	Does the of	fering permit	joint owner	ship of a sir	ngle unit?					••••		Yes X N	o
4. N/A	solicitation registered w broker or de	of purchaser	s in connec and/or with	tion with s a state or st	ales of sec ates, list th	urities in the e name of the	e offering. e broker or o	lf a person	to be listed is	s an associate	d person o	r agent of a l	emuneration for proker or dealer ersons of such a
Full	Name (Last	name first, if	individual)			P-0-17011							
Busi	ness or Resid	dence Addres	s (Number a	and Street, (City, State,	Zip Code)							
Nan	ne of Associa	ited Broker of	Dealer	•									
State	es in Which I	Person Listed	Has Solicit	ed or Intend	ls to Solicit	Purchasers		<u></u>		· ·			·
(Che	ck "All State	es" or check i	individual S	tates)				•••••		•••••			All States
IAL	1	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
MI	1	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
Full	Name (Last	name first, if	individual)										
Bus	ness or Resi	dence Addres	ss (Number a	and Street,	City, State,	Zip Code)							
Nan	ne of Associa	ited Broker o	r Dealer										
Stat	es in Which	Person Listed	Has Solicit	ed or Intend	ls to Solicit	Purchasers							
(Ch	eck "All Stat	es" or check	individual S	tates)									All States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
IMI	1	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]
		name first, if											
Bus	iness or Resi	dence Addre	ss (Number	and Street,	City, State,	Zip Code)							
Nan	ne of Associa	ted Broker o	r Dealer	-, <u></u>									
Stat	es in Which	Person Listed	l Has Solicit	ed or Intend	ls to Solici	Purchasers		<u></u>				1	· · · · · · · · · · · · · · · · · · ·
(Ch	eck "All State	es" or check	individual S	tates)		••••	•••••	•	***************************************	•••••			All States
[AL	l	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[H1]	[ID]
[IL]		[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
IMT	7	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]		[SC]	[SD]	JTNJ	[TX]	[UT]	[VT]	[VA]	[VA]	[WV]	[WI]	[WY]	[PR]

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Type of Security Aggregate Offering Price Sold Debt Equity \$ 6,134,998.81 Common Preferred Convertible Securities (including warrants)..... Partnership Interests.... Other (Specify _____) Total \$ 6,134,998.81 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Number Aggregate Investors Dollar Amount of Purchases \$ 6,134,998.81 Accredited Investors Non-accredited Investors Total (for filings under Rule 504 only) Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1. Dollar Amount Type of Sold Security Type of Offering Rule 505..... Regulation A..... Rule 504..... Total..... a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

X

×

\$ 150,000.00

\$ <u>150,000.000</u>

Transfer Agent's Fees

Printing and Engraving Costs

Legal Fees

Accounting Fees

Engineering Fees.....

Sales Commissions (specify finders' fees separately)

Other Expenses (Identify)

Total

	ER OF INVESTORS, EXPENSES AND		
b. Enter the difference between the aggregate offering price g in response to Part C – Question 4.a. This difference is the			\$5,984,998.81
Indicate below the amount of the adjusted gross proceeds to the If the amount for any purpose is not known, furnish an estim payments listed must equal the adjusted gross proceeds to the is	ate and check the box to the left of the	estimate. The total of the	
		Payment to Officers,	Payment To
0.1		Directors, & Affiliates	Others
Salaries and fees		□ s	□ s
Purchase of real estate		□ s	□ s
Purchase, rental or leasing and installation of machinery and equipm	ent	□ s	□ \$
Construction or leasing of plant buildings and facilities		□ s	□ s
Acquisition of other businesses (including the value of securities in in exchange for the assets or securities of another issuer pursuant to a		□ s	□ s
Repayment of indebtedness	7. '	□ s	□ s
Working capital		□ s	× \$5,984,998.81
Other (specify):		□ s	□ s
		□ s	□ s
Column Totals		□ s	□ s
Total Payments Listed (column totals added)		\$ 5,984,9	
	D. FEDERAL SIGNATURE		
The issuer had duly caused this notice to be signed by the undersign an undertaking by the issuer to furnish to the U.S. Securities and Ex non-accredited investor pursuant to paragraph (b)(2) of Rule 502.	ed duly authorized person. If this notice change Commission, upon written reques	is filed under Rule 505, the t of its staff, the information	following signature constitution furnished by the issuer to
Issuer (Print or Type)	Signature		Date
Acelere, Inc.	1		3/25/03
Name of Signer (Print or Type)	Title of Signer (Print or Type)	71	
Eric C. Jensen, Esq.	Secretary	\	

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. S	TATE SIGNATURE			
1.	ls any party described in 17 CFR 230.262 presently subject to any of the	ne disqualification provisions of suc	ch rule?	Yes	No 🗷
	See Appendix	c, Column 5, for state response.	•		
2.	The undersigned issuer hereby undertakes to furnish to the state admissuch times as required by state law.	inistrator of any state in which the	notice is filed, a notice on Fo	m D (17 CFR 23	9.500) at
3.	The undersigned issuer hereby undertakes to furnish to any state admin	nistrators, upon written request, info	ormation furnished by the issue	r to offerees.	
4.	The undersigned issuer represents that the issuer is familiar with the (ULOE) of the state in which this notice is filed and understands that conditions have been satisfied.				
The	issuer has read this notification and knows the contents to be true and	d has duly caused this notice to be	e signed on its behalf by the u	ndersigned duly a	uthorized
pers	on.		Λ		
Issu	er (Print or Type)	Signature	1	Date	
Ac	elere, Inc.	1		03/25/0	3
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)			
Eri	c C. Jensen, Esq.	Secretary			

			Al	PPENDIX					
1	2		3		4				5
	Intend to non-ac- investors (Part B-	credited in State Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of inve- amount purchas (Part C-It	sed in State em 2)		State UL attach ex waiver gr E-It	cation under OE (if yes, planation of anted (Part tem 1)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
AL									
AK	-								
AZ									
AR									
CA		х	Series A Preferred Stock	7	\$6,134,998.81	0	0		х
СО									
СТ		-							
DE	_								
DC									
FL									
GA	-								
HI									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI	-								
MN									
MS	_								
МО									

				APPENDIX					
1		2	3		4				5
	to non- investo	nd to sell accredited rs in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	a	Type of investor and amount purchased in State (Part C-Item 2)			Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E- Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT									
NE									
NV							-	 	
NH							 		
NJ					 				
NM									
NY									
NC									
ND									
ОН		<u> </u>							
ок						i			
OR									
PA									
RI									
SC							i		
SD									
TN									
TX				-					
UT									
VT									
VA								***	
WA									
wv									·
WI									
WY									
PR									

FORM 2400